PTO/SB/22 (04-09)

Approved for use through 05/31/2009. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009		Docket Number (Optional) 22409-00393-US	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		22409-0	0393-03
Application Number 10/581,090-Conf. #9471		Filed Febi	uary 16, 2007
For IMPLANTABLE ANTENNA			
Art Unit 3729		Examiner	M. N. Trinh
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
x One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$130	Small Entity Fee \$65	\$ 130.00
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$
Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$ \$
Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
x Payment by credit card.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0185			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
x attorney or agent of record. Regi	stration Number	39,410	
attorney or agent under 37 CFR 1.34.			
Registration number if acting under 37 CFR 1.34			
/Michael G. Verga/		June 9, 2009	
Signature		Date (200) 201 7111	
Michael G. Verga Typed or printed name		(202) 331-7111 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. X Total of1 forms are submitted.			
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